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Atty Docket No. 014907-001910US

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ATTENTION: Examiner Hines, J.  
TELEPHONE NO.: 571-272-0859

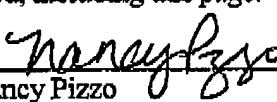
Group Art Unit 1645

**OFFICIAL COMMUNICATION  
FOR THE PERSONAL ATTENTION OF****EXAMINER Hines, J.****CERTIFICATION OF FACSIMILE TRANSMISSION**

I hereby certify that the following document(s) in re Application of Jeff Gray  
Application No. 09/877,933, filed June 7, 2001  
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1. SB/21 - Transmittal Form
2. Amendment (18 pgs)
3. Copy of Declaration of Dr. Gunars E. Valkirs under 37 CFR 1.132 (4 pgs)

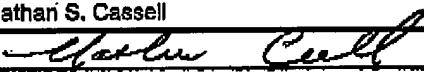
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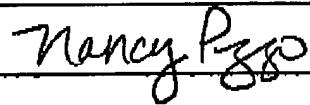
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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/877,933
		Filing Date	June 7, 2001
		First Named Inventor	Gray, Jeff
		Art Unit	1645
		Examiner Name	Hines, J.
Total Number of Pages in This Submission		Attorney Docket Number	
		014907-001910US	

<b>ENCLOSURES (Check all that apply)</b>					
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.62 or 1.63		<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)			
<table border="1" style="width: 100%;"> <tr> <td style="width: 10%;">Remarks</td> <td>The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.</td> </tr> </table>				Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.				
<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): • Declaration of Dr. Gunars E. Valkirs under 37 CFR 1.132					

<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>			
Firm or Individual name	Townsend and Townsend and Crew LLP Nathan S. Cassell Reg. No. 42,396		
Signature			
Date	09/17/2004		

<b>CERTIFICATE OF TRANSMISSION/MAILING</b>			
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